



World Network of Users and Survivors of Psychiatry

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1. Aspects of cultural heritage relevant to people with psychosocial disabilities
 - a. Naming ourselves – words for madness and madpeople that are positive towards difference
 - a. Reclaiming “madness” and mad pride
 - b. “Tangata motuhake” – meaning “people who cherish their own uniqueness”; “whanau hauaa” meaning “family who are diverse”
 - c. Finding, honoring and preserving other examples
 - b. Cultural practices that honor and include madness and madpeople in life of community
 - a. Madness as calling to spiritual leadership e.g. shamanism
 - b. Madness of artists and creative impulse
 - c. Modern “mad movement” creating spaces for self-definition and mutual support, and expanding into community and public spaces, raising awareness and welcoming others
 - c. Holistic healing practices
 - a. Traditional and faith healing, relevant to spiritual and cultural beliefs, integrates personal and social meaning/values
 - b. First-person-centered, phenomenological and interactive approaches need to be promoted, shared, and preserved (knowledge and skill)
 - d. History of our oppression and resistance
 - a. Asylum records, journals, cemeteries, art
 - b. Manifestos, first-person accounts, newsletters, advocacy projects
 - c. Human rights violations and crimes against humanity – Nazi mass murders by psychiatrists, psychiatric literature as evidence of knowledge and disregard of harm caused by treatments, brutal and careless experimentation,

records of deaths in asylums, lobotomy/psychosurgery, etc.

- d. Abandonment, degrading conditions, hiding, deprivation of liberty, abuses of all kinds (sexual, physical, medical, financial) in homes, communities, religious temples, and medical/social institutions
- e. Laws old and new as cultural statements and records
- f. Psychiatric Survivor Archives in Toronto, others?
- g. History of our work on the CRPD needs to be preserved in archives and documented through writing and interviews with participants

2. Access to cultural heritage by persons with psychosocial disabilities

a. Barriers to access

- a. Education – children and young people put into psychiatric institutions are deprived of a quality education; education interrupted
- b. Poverty – institutionalization deprives people of work, family relationships and their homes, making it more likely to fall into poverty, resulting in further discrimination (including because the cause of the poverty, institutionalization, will trigger discrimination based on disability)
- c. Discrimination and violence (e.g. beatings, shunning, etc.) when people with psychosocial disabilities try to participate in community life

b. Need for inclusion

- a. Places of worship and religious communities should be open to people with psychosocial disabilities and their self-definition of experience (i.e. should not say “that is mental illness” and not relevant to “real” religious or spiritual experience)
- b. Workplaces and scientific/academic communities should be open to the knowledge and wisdom coming from people with psychosocial disabilities as trauma survivors and people with experience of madness
 - i. Mad Studies and inclusion in disability studies, in all fields including law, literature, history, social sciences
 - ii. Role of people with psychosocial disabilities as leaders in mental health field – ensure these positions are of equal status and financial

- remuneration as non-disabled persons performing comparable tasks
 - c. Community gatherings need to be open and welcoming, e.g. pubs, village square
3. Questioning received cultural heritage from psychosocial disability perspective
- a. Negative beliefs about madness and madpeople, e.g. that they are cursed, or harmful to others, or have a “chemical imbalance” that makes their brain and behavior defective
 - i. Both traditional and modern beliefs may have negative aspects
 - b. Exclusions and negative beliefs entrenched in custom and law, have to be transformed and considered as aspects of our history of oppression but not preserved without questioning.

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